

Sarcoidosis

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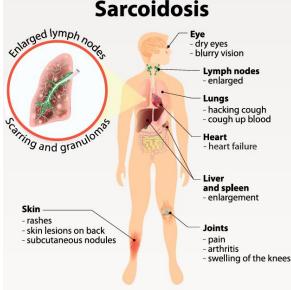
Disclosure

• No financial conflict of interest



What is Sarcoidosis ?

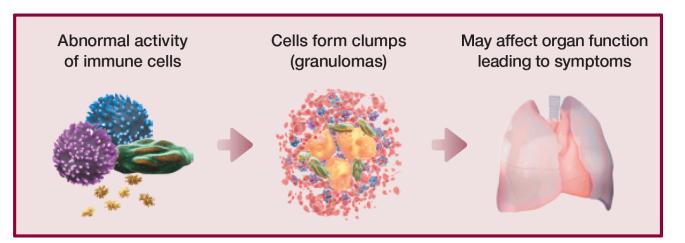
 A chronic inflammatory disease which can affect any organ of body but most commonly lungs.





What is Sarcoidosis?

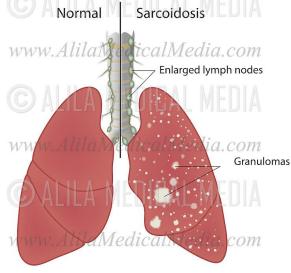
 Characterized by overreaction of immune system which results in the build up of several small clusters of inflammatory cells called "Granulomas" in the affected organs.





What is Sarcoidosis?

 Formation of too many of these clusters may interfere with organ structure and function.



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Possible causes

 No one knows exactly what causes sarcoidosis

• Thought to be resulting from one or more exposures to "trigger factors" in people with certain genetic make up.



Possible causes

Suspected triggers

- bacteria,
- viruses,
- fungi
- chemicals
- These triggers are usually harmless in most people, but may irritate the immune systems of people who are at genetic risk for developing sarcoidosis.



Risk Factors

- Affects people worldwide, of any age, race, gender
- In US, most common and severe in African Americans and European "particularly Scandinavian" descent.
- Age: 20 40 yrs of age
- Gender: Women > men



Associated Risk Factors

- Environmental exposure
 - inorganic particles, insecticides, and mold
- Occupational exposure
 - U.S. Navy, metalworking, firefighting, and the handling of building supplies
- Fire fighters and rescue workers involved in 2001 WTC disaster



Genetic Factors

• Risk higher if close family members have sarcoidosis



Symptoms

- Many people are often asymptomatic , detected incidentally on chest X-ray done during routine physical exam
- Symptomatic people can have variable signs and symptoms depending on the organs affected.



Symptoms

Common symptoms:

- shortness of breath,
- wheezing,
- chronic cough
- Chest pain



Other Symptoms

- Fatigue
- Weight loss
- Night sweats
- Skin rashes
- Eye symptoms
- Irregular heart beat
- Leg swelling

- Joint pain, swelling
- Muscle soreness
- Weakness & Numbness
- Enlarged Lymph nodes
- High blood or urine calcium level
- Kideny stones, Renal failure



Diagnosis

Sarcoidosis is a diagnosis of exclusion

- There is no objective test which can easily diagnose sarcoidosis.
- Numerous exams and tests are required to confirm the diagnosis and to decide the best treatment options.



Diagnosis

- Chest X-ray
- CT scan
- Lung function test
- Biopsy of the affected organs (Lungs, lymph nodes, skin, bone, liver)
- Blood tests (Blood cell count, liver test, renal function test, blood and urine calcium, ACE level)
- MRI
- PET scan
- Cardiac tests (EKG, Echo, heart rhythm monitoring)



Clinical course

- In many cases of sarcoidosis, no treatment is necessary and sarcoidosis may go away in 2-5 years without medical treatment.
- The disease may never reappear or may reappear (in ~ 5%) later in life.
- In other patients, the disease is progressive, causing scarring in affected organs and requiring ongoing treatment



Treatment

- Treatment is not indicated in asymptomatic patients
- These patients are monitored closely for worsening
- Treatment is started when symptoms are severe enough to impair quality of life or when there are danger organ damage or life.



Corticosteroids: Prednisone

- First line treatment
- Reduces inflammation
- Starting dose 20-40 mg daily
- Relieves symptoms in 1-3 months
- Then taper prednisone slowly to the lowest dose which will keep symptoms under control and cause less side effects
- Stay on this dose for another 6 months then taper it off
- Common Side effects: weight gain, insomnia, mood swings, acne, high blood sugar, osteoporosis, risk of infections



- Immune system suppressant medication:
 - Methotrexate, Azathioprine, Leflunomide, Cellcept
 - 2nd line treatment
 - Indicated when prednisone is not effective or causing significant side effects
 - Can take up to 6 months to show its effects
 - Side effects: Liver, kidney, bone marrow toxicities, malignancies
 - Blood tests are done every 1-3 months to monitor side effects



Antimalarial drugs:

- Hydroxychloroquine (Plaqunil)
- Effective in skin symptoms or a high level of calcium
- Side effects: Nausea, vision problem
- Needs eye exam every 6 months



Biological agent (Anti-TNF)

- Infliximab (Remicade) IV
- Adalimumab (Humira) SQ
- Third line treatment
- Side effects: Risk of infections, liver toxicities, lupus like illness, cancers



Treatment

- Sarcoidosis is often treated with the help of a multidisciplinary team of health care professionals who specialize in the treatment of the lungs, heart, brain, kidneys, liver, eyes, and skin.
- At specialized medical centers, these health care providers work as a team to develop a comprehensive treatment plan.



Follow up

- Asymptomatic patients
 - Initially every 6 months, then annually for 3-5 years
- Symptomatic patients
 - Every 3-6 months
- Follow up test:
 - Blood tests and PFT every 3-6 months
 - Chest X-ray every 6-12 months



Complications

- Fibrosis of lungs
- Cavities in lungs with fungal ball formation
- Pulmonary hypertension
- Side effects of medications
- Fatigue, depression, small fiber neuropathy



Take home points

- A chronic inflammatory disease characterized by formation of clusters inflammatory cells "granuloma"
- Exact cause unknown but is thought to be due to overreaction of immune system in response to exposure to triggers in people with certain genetic make up
- Has been associated with exposure to inorganic particles, insecticides, molds, certain occupations line navy, firefighters, metalworking,



Take home points

- More common and severe in AA
- Risk increases if close relatives have sarcoidosis
- Can affect any organ but most common in lungs
- Biopsy of affected organ is needed for diagnosis
- Many patients are asymptomatic and may go away in 2-5 years without medical treatment
- Common symptoms are respiratory followed skin, eye
- Treatment is indicated only in symptomatic patients or if affecting, heart, brain
- First line treatment : Prednisone



Thank you

• Questions?

Question

What is the definition of Sarcoidosis ?



